

**NEW MOTOR VEHICLE BOARD****Consumer Mediation Services Program**

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Sacramento, California 95814
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E-Mail: nmvb@pacbell.net
Website: nmvb.ca.gov

MEDIATION REQUEST FORM

CASE NO. _____

COMPLAINANT NAME

FIRST

MI

LAST

ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE # (Home)

TELEPHONE # (Business)

E-Mail

Complaint is against: (Check box and fill out all sections completely)

☐ **Selling Dealer**☐ **Servicing Dealer**☐ **Manufacturer/Distributor**

NAME

NAME

NAME

ADDRESS

ADDRESS

ADDRESS

TELEPHONE #

TELEPHONE #

TELEPHONE #

VEHICLE (Make)

(Model)

(Year)

DATE OF PURCHASE / LEASE

VEHICLE LICENSE NO.

CURRENT MILEAGE

☐ Purchase☐ Lease

MILEAGE AT PURCHASE / LEASE

VEHICLE I.D. NO.

☐ New☐ Used

TYPE OF WARRANTY ON VEHICLE

☐ Manufacturer's☐ Extended Warranty☐ No Warranty

Have you given written notice of defects to manufacturer?

☐ Yes☐ No

Has manufacturer (or designated agent) attempted repairs?

☐ Yes☐ No

If yes, list repair dates: _____

COMPLAINT

Please explain the details of your complaint and the action you are seeking on the reverse side of this form, or attach a typed 1-2 page letter.

**IMPORTANT NOTICE: I understand a copy of this complaint may be sent to the dealer(s), manufacturer or distributor.**

Sections 20 and 3000 of the California Vehicle Code make it unlawful to use a false or fictitious name or knowingly make false statement or knowingly conceal any material fact in any document filed with the New Motor Vehicle Board.

Signature _____

Date _____

